Fill in this inf	formation to identify your case	and this filing:		
Debtor 1	Joseph Ray Tarrow	g.		
	First Name	Middle Name Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Last Name		
-				
United States	Bankruptcy Court for the: EAS	FERN DISTRICT OF MICHIGAN		
Case number	17-50660			☐ Check if this is an amended filing
Official F	Form 106A/B			
Schedi	ule A/B: Propert	V		12/15
Part 1: Descr 1. Do you own No. Go to	uestion. ibe Each Residence, Building, Land or have any legal or equitable intere	rate sheet to this form. On the top of any additional page, or Other Real Estate You Own or Have an Interest In est in any residence, building, land, or similar property?	s, write your name and case	number (ii known).
	ere is the property?			
□ No ■ Yes 3.1 Make: Model:	Chevy Silverado	Who has an interest in the property? Check one	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Year:	2002	■ Debtor 1 only □ Debtor 2 only	Current value of the	
• • • • • • • • • • • • • • • • • • • •	mate mileage: 268000 formation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	Current value of the portion you own?
		☐ Check if this is community property (see instructions)	\$3,000.00	\$3,000.00
Examples: E □ No ■ Yes 4.1 Make: Model: Year:	Polaris Scrambler 2015	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only		d claims on Schedule D:
Other in	formation:	☐ At least one of the debtors and another ☐ Check if this is community property	\$8,000.00	\$8,000.00
		(see instructions)	φυ,υυυ.υυ	φυ,υυυ.υυ

De	ebtor 1 Joseph Ray	Tarrow	Case number (if known)	17-50660
5		the portion you own for all of your entries from Part 2, including ed for Part 2. Write that number here		\$11,000.00
Da	rt 3: Describe Your Perso	and Household Itams		
		egal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and a Examples: Major appliar ☐ No ☐ Yes. Describe	furnishings nces, furniture, linens, china, kitchenware		
		Living and Dining room, bedroom, kitchen furniture & ut	ensils.	\$1,000.00
7.		and radios; audio, video, stereo, and digital equipment; computers, prin I phones, cameras, media players, games	ters, scanners; music c	ollections; electronic devices
		1 TV, Cell Phone, computer, iPad at Debtor(s)' Residence	e.	\$1,000.00
8.		I figurines; paintings, prints, or other artwork; books, pictures, or other a ons, memorabilia, collectibles	art objects; stamp, coin	or baseball card collections;
		RC cars located at the Debtor's Residence.		\$500.00
	musical instr ■ No □ Yes. Describe Firearms	ographic, exercise, and other hobby equipment; bicycles, pool tables, g	olf clubs, skis; canoes	and kayaks; carpentry tools;
11.	Clothes Examples: Everyday cl □ No ■ Yes. Describe	othes, furs, leather coats, designer wear, shoes, accessories Clothing owned by Debtor(s) at Debtor(s)' Residence and Debtor(s)' possession.	d in	\$400.00
12.	Jewelry Examples: Everyday je ■ No □ Yes. Describe	welry, costume jewelry, engagement rings, wedding rings, heirloom jew	welry, watches, gems, ς	gold, silver

Debtor	Joseph Ray Tarrow	<u> </u>		Case number (if known)	17-50660
-	n-farm animals amples: Dogs, cats, birds, ho	orses			
■ N					
ΠY	es. Describe				
14. Any ■ N	-	ehold items you did n	ot already list, including any health a	ids you did not list	
	es. Give specific information	١			
			rt 3, including any entries for pages y	ou have attached	\$3,400.00
Part 4:	Describe Your Financial Asse	ets			
Do you	own or have any legal or	equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□и	amples: Money you have in y		ne, in a safe deposit box, and on hand v	vhen you file your petition	on
				Cash on Debtor(s)	
				Person or	*=
				Possession.	\$50.00
□ N ■ Y	•	·	vith the same institution, list each. Institution name:		
		Checking/Saving	js –		
	17.1.	Account(s) [estimate]	Bank of America		\$2,500.00
Exa ■ N			erage firms, money market accounts		
	nt venture	l interests in incorpor	ated and unincorporated businesses	s, including an interes	t in an LLC, partnership, and
	o es. Give specific informatior	about them			
		ame of entity:		% of ownership:	
Ne. No.	gotiable instruments include n-negotiable instruments are	personal checks, cash	able and non-negotiable instruments iers' checks, promissory notes, and more sfer to someone by signing or delivering	ney orders.	
■ N	•				
ЦY	es. Give specific information Iss	about them suer name:			
			3(b), thrift savings accounts, or other pe	ension or profit-sharing	plans
ΠY	es. List each account separa		1 22 2		
	Туре	of account:	Institution name:		

D	ו וטוטפ	Joseph Ra	ay rarrow		C	ase number (# known) 1/	-50660
22.	Your sl	ty deposits and hare of all unu	nd prepayments used deposits you ha	ave made so that you may con repaid rent, public utilities (ele			or others
	_			Institution r	name or individual:		
23.	_	ies (A contrac	t for a periodic payn	nent of money to you, either fo	r life or for a number of y	years)	
	■ No □ Yes		Issuer name and d	escription.			
24.			ation IRA, in an acc), 529A(b), and 529	count in a qualified ABLE pro (b)(1).	ogram, or under a qual	lified state tuition progra	m.
	Yes		Institution name an	d description. Separately file the	ne records of any interes	sts.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	, equitable or	future interests in	property (other than anythir	g listed in line 1), and	rights or powers exercis	able for your benefit
	☐ Yes.	Give specific	information about th	nem			
	Examp ■ No	oles: Internet d		secrets, and other intellectualities, proceeds from royalties and mem		is	
	Examp ■ No	oles: Building p	s, and other general permits, exclusive lick information about the	enses, cooperative associatio	n holdings, liquor license	es, professional licenses	
		property owe					Current value of the
	oney or p	property owe	u to you:				portion you own? Do not deduct secured claims or exemptions.
	_	unds owed to	o you				
	□ No ■ Yes.	Give specific i	nformation about th	em, including whether you alre	ady filed the returns and	d the tax years	
				Potential partial interest 2017 Income Tax Re based on prior year	fund (estimate	Federal, State	\$600.00
	Examp ■ No		or lump sum alimon	y, spousal support, child supp	ort, maintenance, divorc	e settlement, property sett	lement
	Examp ■ No	oles: Unpaid w benefits;	unpaid loans you m	rance payments, disability ben ade to someone else	efits, sick pay, vacation	pay, workers' compensati	on, Social Security
	Interes	Give specific	ce policies				
	Examp ■ No	oles: Health, d	sability, or life insur	ance; health savings account (HSA); credit, homeowne	er's, or renter's insurance	
	☐ Yes. I	Name the insu	urance company of e Company n	each policy and list its value. ame:	Beneficiary	y:	Surrender or refund value:

Debt	otor 1			Case number (if known)	17-50660
I	Any interest in property that is due you If you are the beneficiary of a living trust, a someone has died.			are currently entitled to rece	eive property because
	No				
	Yes. Give specific information				
_	Claims against third parties, whether or Examples: Accidents, employment dispute			and for payment	
	■ No ☑ Yes. Describe each claim				
	Other contingent and unliquidated clain No	s of every nature, including	counterclaims of	of the debtor and rights to	set off claims
	Yes. Describe each claim				
	Any financial assets you did not already ■ No	list			
	Yes. Give specific information				
36.	Add the dollar value of all of your entr		entries for pag	es you have attached	\$3,150.00
Part	5: Describe Any Business-Related Property	You Own or Have an Interest In.	. List any real esta	te in Part 1.	
	Oo you own or have any legal or equitable int	erest in any business-related pro	perty?		
	No. Go to Part 6.				
	Yes. Go to line 38.				
Part	6: Describe Any Farm- and Commercial Fis If you own or have an interest in farmland, I		or Have an Interes	et In.	
	Do you own or have any legal or equital	ole interest in any farm- or co	mmercial fishin	g-related property?	
	No. Go to Part 7.				
l	☐ Yes. Go to line 47.				
Part	7: Describe All Property You Own or H	ave an Interest in That You Did N	Not List Above		
	Do you have other property of any kind				
	Examples: Season tickets, country club m ■ No	embersnip			
	Yes. Give specific information				
54.	Add the dollar value of all of your entr	es from Part 7. Write that nu	mber here		\$0.00
0 1.					φο.σο
Part	8: List the Totals of Each Part of this Fo	rm			
55.	,				\$0.00
	,	<u> </u>	\$11,000.00		
	•	tems, line 15	\$3,400.00		
	,		\$3,150.00		
	• • •		\$0.00		
	Part 7: Total other preparty not listed		\$0.00		
01.	Part 7: Total other property not listed,	mie 34 +	\$0.00		
62.	Total personal property. Add lines 56 th	rough 61	\$17,550.00	Copy personal property to	otal \$17,550.00
63.	Total of all property on Schedule A/B.	Add line 55 + line 62			\$17,550.00

page 5

Fill in this infor	mation to identify your				
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case number	17-50660				
(if known)	17 30000			_	Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	2002 Chevy Silverado 268000 miles Line from Schedule A/B: 3.1	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(2)				
	Line Irom Scriedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit					
	Living and Dining room, bedroom, kitchen furniture & utensils.	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 6.1		100% of fair market value, any applicable statutory lir						
	1 TV, Cell Phone, computer, iPad at Debtor(s)' Residence.	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	RC cars located at the Debtor's Residence.	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 8.1			100% of fair market value, up to any applicable statutory limit					
	2 Rifles located at debtor(s)' Residence.	\$500.00		\$500.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Schedule A/B that lists this property		Current value of the portion you own Copy the value from	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption				
		Schedule A/B	One	or only one box for each exemption.					
	Clothing owned by Debtor(s) at Debtor(s)' Residence and in	\$400.00	•	\$400.00	11 U.S.C. § 522(d)(3)				
	Debtor(s)' possession. Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					
	Cash on Debtor(s) Person or Possession.	\$50.00		\$50.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit					
	Checking/Savings Account(s) [estimate]: Bank of America	\$2,500.00	•	\$2,500.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit					
Federal, State: Potential partial interest in 2015, 2016, 2017 Income Tax Refund (estimate based on prior year refund). Line from Schedule A/B: 28.1		\$600.00		\$600.00	11 U.S.C. § 522(d)(5)				
				100% of fair market value, up to any applicable statutory limit					
3.	 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No								
	Yes. Did you acquire the property covere	ed by the exemption wit	thin 1	,215 days before you filed this case	?				
	□ No			. , , ,					
□ Yes									

Fill in this information	to identify you	r case:				
Debtor 1 Jos	seph Ray Tar	row				
	Name		t Name		-	
Debtor 2						
(Spouse if, filing) First	Name	Middle Name Last	t Name			
United States Bankrupto	cy Court for the:	EASTERN DISTRICT OF MICHIGA	N		-	
Case number 17-506	:60					
Case number 17-506	960				☐ Check	if this is an
,					_	led filing
Official Form 100	2D					
Official Form 106		Mh - Hayra Claima Ca	aa	h Duan ant		
Schedule D: C	realtors	Who Have Claims Sec	curea	by Propert	<u>y </u>	12/15
		f two married people are filing together, bo out, number the entries, and attach it to this				
1. Do any creditors have cl	laims secured by	your property?				
☐ No. Check this bo	ox and submit th	nis form to the court with your other sche	edules. You	have nothing else t	to report on this form.	
Yes. Fill in all of t		ŕ		ŭ	·	
		Jelow.				
Part 1: List All Secu				Column A	Column B	Column C
for each claim. If more than	n one creditor has	nore than one secured claim, list the creditor s a particular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
much as possible, list the cl	laims in alphabetion	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Chief Financial	CU	Describe the property that secures the cla	aim:	\$16,342.00	\$8,000.00	\$8,342.00
Creditor's Name		2015 Polaris Scrambler				
700 Jacken Ava		As of the date you file, the claim is: Check	all that			
790 Joslyn Ave Pontiac, MI 483		apply.				
Number, Street, City, Sta		☐ Contingent ☐ Unliquidated				
Number, Street, Sity, Ste	ne a zip code	☐ Disputed				
Who owes the debt? Ch	eck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortga	age or secur	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 of	only	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At least one of the debto	ors and another	☐ Judgment lien from a lawsuit				
Check if this claim rela	ates to a	Other (including a right to offset)				
Date debt was incurred	2015	Last 4 digits of account number				
2.2 Specialized Loa	n Sorvi	Describe the property that secures the cla	aim·	\$45,573.00	Unknown	Unknown
Creditor's Name	an oervi	12283 Rose Lane, Atlanta, MI 49		Ψ+3,373.00	Olikilowii	Olikilowii
		12203 Nose Lane, Atlanta, Wi 43	703			
8742 Lucent Blv	vd Ste 300	A collection of the state of th				
Highlands Rand	ch, CO	As of the date you file, the claim is: Check apply.	all that			
80129		Contingent				
Number, Street, City, Sta	ate & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Ch	eck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortg	age or secur	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2 of		Statutory lien (such as tax lien, mechanic	c's lien)			
At least one of the debto		☐ Judgment lien from a lawsuit				
☐ Check if this claim rela	ates to a	Other (including a right to offset)				

Official Form 106D

community debt

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1 Joseph Ra	ay Tarrow		Case number (if know) 17-50660			
First Name	Middle Name	Last Name		, ,	-	
Date debt was incurred	Opened 07/01 Last Active 6/15/17	Last 4 digits of account number	8376			
If this is the last page Write that number here	of your form, add the de:	n A on this page. Write that number h ollar value totals from all pages. ebt That You Already Listed	ere:	\$61,915 \$61,915		
Use this page only if you trying to collect from yo	u have others to be not u for a debt you owe to y of the debts that you	ified about your bankruptcy for a deb someone else, list the creditor in Par listed in Part 1, list the additional cred	rt 1, and th	en list the collection ag	ency here. Similarly, if you ha	ave more
Name, Number, St 34th District (Case no: 16-2 11131 S. Way Romulus, MI	673-GC) ne Rd.	ode		h line in Part 1 did you en		
Name, Number, St Holzman Corl Attorneys At 28366 Frankli	Law	ode		h line in Part 1 did you en	ter the creditor? 2.1	

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Southfield, MI 48034

Fill in this	information to identify your ca	ise:		
Debtor 1	Joseph Ray Tarrow	ı		
Dalatano	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT C	PF MICHIGAN	
Case numb	per 17-50660			
(if known)	17-30000			Check if this is an amended filing
Official	Form 106E/F			
	ıle E/F: Creditors Wh	o Have Unseci	red Claims	12/15
any executor Schedule G: Schedule D: left. Attach t	ry contracts or unexpired leases th Executory Contracts and Unexpire Creditors Who Have Claims Secur	at could result in a claim. ed Leases (Official Form 1 ed by Property. If more sp	RIORITY claims and Part 2 for creditors with NONPRIORITY Also list executory contracts on Schedule A/B: Property (O 06G). Do not include any creditors with partially secured cla bace is needed, copy the Part you need, fill it out, number the on to report in a Part, do not file that Part. On the top of any a	fficial Form 106A/B) and on ims that are listed in entries in the boxes on the
Part 1:	List All of Your PRIORITY Unse	ecured Claims		
1. Do any	creditors have priority unsecured	claims against you?		
■ No. (Go to Part 2.			
☐ Yes.				
Part 2:	List All of Your NONPRIORITY	Unsecured Claims		
3. Do any	creditors have nonpriority unsecu	red claims against you?		
□ No. `	You have nothing to report in this part	t. Submit this form to the co	urt with your other schedules.	
Yes.				
unsecur	ed claim, list the creditor separately for	or each claim. For each clai	ler of the creditor who holds each claim. If a creditor has more im listed, identify what type of claim it is. Do not list claims already solve the more than three nonpriority unsecured claims fill out	included in Part 1. If more
				Total claim
4.1 A1	T&T Wireless	Last 4 digits	s of account number	\$900.00
Р.	npriority Creditor's Name O. Box 8758	When was t	he debt incurred?	
	ortland, OR 97207 mber Street City State Zlp Code	As of the da	te you file, the claim is: Check all that apply	
	no incurred the debt? Check one.	AS OF THE GA	the you me, the claim is. Oneck all that apply	
_	Debtor 1 only	☐ Continge	nt	
	Debtor 2 only	☐ Unliquida		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and anoth	_ '	NPRIORITY unsecured claim:	
	Check if this claim is for a commu			
del		<u> </u>	ns arising out of a separation agreement or divorce that you did n	ot
_	No		pension or profit-sharing plans, and other similar debts	
	Yes	Other. Sp	pecify wireless	

Debto	or 1 Joseph Ray Tarrow		Case number (if know) 17-50660				
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	4302	\$696.00			
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 08/14 Last Active 2/22/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	Other. Specify Credit Card				
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	8941	\$372.00			
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 05/12 Last Active 2/22/16				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	·					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Credit Card	<u> </u>				
4.4	Credit Union One Nonpriority Creditor's Name	Last 4 digits of account number	1846	\$14,086.00			
	400 E Nine Mile Ferndale, MI 48220	When was the debt incurred?	Opened 12/14 Last Active 1/30/17				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify Automobile	9				

Debto	r 1 Joseph Ray Tarrow		Case number (if know) 17-50660				
4.5	Cws/cw Nexus Nonpriority Creditor's Name	Last 4 digits of account number	9732	\$1,541.00			
	101 Crossways Park Dr W Woodbury, NY 11797	When was the debt incurred?	Opened 6/03/15 Last Active 2/28/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Credit Card					
4.6	Div Adj Serv Nonpriority Creditor's Name	Last 4 digits of account number	4712	\$1,498.00			
	600 Coon Rapids Blvd Nw Coon Rapids, MN 55433	When was the debt incurred?	Opened 6/03/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	■ Other. Specify 01 Iret Prop	perties				
4.7	First Premier Bank Nonpriority Creditor's Name	Last 4 digits of account number	4834	\$834.00			
	601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 09/15 Last Active 1/23/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	rofit-sharing plans, and other similar debts				
	■ No	Other. Specify Credit Card					
	Yes						

Debto	or 1 Joseph Ray Tarrow		Case number (if know) 17-50660					
4.8	First Premier Bank	Last 4 digits of account number	5793	\$765.00				
	Nonpriority Creditor's Name 601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 05/14 Last Active 1/08/16					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Credit Card	<u> </u>					
4.9	Lvnv Funding Llc Nonpriority Creditor's Name	Last 4 digits of account number	6100	\$1,384.00				
	Po Box 10497 Greenville, SC 29603	Opened 10/16						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	■ No	Debts to pension or profit-sharing						
	☐ Yes	■ Other. Specify Bank N.A.	Company Account Credit One					
4.1	Merrick Bank	Last 4 digits of account number		\$1,300.00				
	Nonpriority Creditor's Name P.O. Box 9204 Old Bethpage, NY 11804	When was the debt incurred?						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes							

Rent Recover	Last 4 digits of account number	2331	\$2,611.0				
Nonpriority Creditor's Name 729 N Rt 83 Ste 320 Bensenville, IL 60106	When was the debt incurred?	Opened 11/30/15					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply					
■ Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
Yes	Other. Specify 09 Sun Cor	nmunities Inc Academ					
Syncb/care Credit	Last 4 digits of account number	4189	\$290.0				
Nonpriority Creditor's Name	_	Opened OF/A Leet Active					
950 Forrer Blvd Kettering, OH 45420	When was the debt incurred?	Opened 05/14 Last Active 6/20/17					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
■ Debtor 1 only	☐ Contingent						
☐ Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?							
■ No	☐ Debts to pension or profit-sharin						
Yes	Other. Specify Charge Acc	count					
Untd Res Sys	Last 4 digits of account number	14N1	\$100.0				
Nonpriority Creditor's Name 3501 S Teller St Lakewood, CO 80235	When was the debt incurred?	Opened 5/02/17					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
■ Debtor 1 only	Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims						
•							
No	Debts to pension or profit-sharin	g plans, and other similar debts					

Debtor	1 Joseph Ray Tarrow		Case number (if know) 17	7-50660					
4.1	Untd Res Sys	Last 4 digits of account number	61N1	\$100.00					
	Nonpriority Creditor's Name 3501 S Teller St Lakewood, CO 80235	When was the debt incurred?	Opened 6/06/16						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that y	ou did not					
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts						
	☐ Yes	Other. Specify 01 Us Xpre	ss Cd						
4.1	Verve	Last 4 digits of account number		\$500.00					
	Nonpriority Creditor's Name PO Box 8099 Newark, DE 19714-8099	When was the debt incurred?							
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply						
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	Disputed	·						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community debt	Student loans		and did a s					
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ou dia not						
	No	☐ Debts to pension or profit-sharin							
	Yes	Other. Specify credit							
4.1	Webbank/fingerhut	Last 4 digits of account number	7724	\$166.00					
	Nonpriority Creditor's Name 6250 Ridgewood Rd Saint Cloud, MN 56303	When was the debt incurred?	Opened 02/16 Last Act 6/30/17	ive					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that y	ou did not					
	No	Debts to pension or profit-sharin	g plans, and other similar debts						
	☐ Yes								
	☐ Yes ☐ Other. Specify Charge Account								

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 7

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 27,143.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 27,143.00

Fill in this inform	mation to identify your				
Debtor 1	Joseph Ray Tarro				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case number	17-50660				
(if known)	17 30000				Check if this is an amended filing
					amenueu illing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th	e contract or lease	State what the contract or lease is for					
2.1										
	Name									
	Number	Street			_					
	City		State	ZIP Code						
2.2										
	Name									
	Number	Street								
	City		State	ZIP Code	_					
2.3	Oity		Olato	211 0000						
	Name				_					
	Number	Street								
	City		State	ZIP Code	_					
2.4	<u> </u>		<u> </u>							
	Name				_					
	Number	Street			_					
	City		State	ZIP Code	<u> </u>					
2.5	Oity		Olalo	211 0000						
	Name				_					
	Number	Street			_					
	City		State	ZIP Code						

Fill in this	information to identify your	case:			
Debtor 1	Joseph Ray Tarro	ow .			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fill	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN		
Case num (if known)	17-50660				☐ Check if this is an amended filing
	ll Form 106H dule H: Your Cod	ebtors			12/15
people are fill it out, a	s are people or entities who a e filing together, both are equ and number the entries in the e and case number (if known)	ally responsible for sup boxes on the left. Attac	oplying correct informati th the Additional Page to	on. If more space is needed	d, copy the Additional Page,
1. Do	you have any codebtors? (If	you are filing a joint case	, do not list either spouse	as a codebtor.	
■ No					
Arizor	chin the last 8 years, have you na, California, Idaho, Louisiana, . Go to line 3. s. Did your spouse, former spou	Nevada, New Mexico, P	uerto Rico, Texas, Washii		es <i>and territories</i> include
in line Form	lumn 1, list all of your codebt e 2 again as a codebtor only i 106D), Schedule E/F (Official olumn 2.	f that person is a guara	ntor or cosigner. Make s	ure you have listed the cre	ditor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		Column 2: The creditor Check all schedules that	to whom you owe the debt apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street City	State	ZIP Code		
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐	
	Number Street City	State	ZIP Code	-	

Fill	in this information t	o identify your ca	35e.				1				
	otor 1	Joseph Ray									
	otor 2 ouse, if filing)					_					
Uni	ted States Bankrup	tcy Court for the	: EASTERN DISTRICT	OF MICHIGAN		_					
	se number 17-	-50660						Check if this is: An amended filing			
_										ring postpetition following date	
	fficial Form						M	M / DD/ Y	YYY		
S	chedule I:	Your Inco	ome								12/15
spo atta	use. If you are sep ch a separate she t 1: Describ	parated and you et to this form. e Employment	are married and not filii r spouse is not filing wi On the top of any additi	th you, do not inclu	de inforn	natio	on about	your spo	use. If r	more space is	needed,
1.	Fill in your empl information.	oyment		Debtor 1	Debtor 1			Debtor 2	or non-	-filing spouse	
	If you have more than one job, attach a separate page with		Employment status	■ Employed				☐ Emplo			
	information about employers.			☐ Not employed				□ Not en	nployed		
	Include part-time,	seasonal or	Occupation	truck driver							
	self-employed wo		Employer's name	KB Transportat	ion, Inc.						
	Occupation may i or homemaker, if		Employer's address	PO Box 1445 Sioux City, IA 5	1102						
			How long employed to	here?							
Par	t 2: Give De	tails About Mor	nthly Income								
	mate monthly incouse unless you are		ate you file this form. If	you have nothing to re	eport for a	any l	ine, write	\$0 in the	space. I	nclude your no	n-filing
	u or your non-filing e space, attach a se		ore than one employer, co this form.	ombine the informatio	n for all e	mplo	oyers for th	nat persor	on the	lines below. If	you need
							For Debt	tor 1		ebtor 2 or iling spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	4,8	364.90	\$	N/A	_
3.	Estimate and lis	t monthly overt	ime pay.		3.	+\$		0.00	+\$_	N/A	-
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	4,86	4.90	\$_	N/A	

Debt	or 1 Jose	ph Ray Ta	rrow					_	Ca	ase num	nber (<i>if kr</i>	own)	17-5	0660		
	Copy line	4 here						4.	F	For De	btor 1 4,864	l.90		Debtor		
5											.,					<u>-</u>
5.	5a. Tax ,		ions: and Social S ributions fo	-				5a. 5b.			1,290	0.42	\$_ \$		N/A N/A	_
		•	ibutions for		•			5c.	\$			0.00	\$_		N/A	_
		-	ments of ret		-			5d.				0.00	\$_		N/A	_
	5e. Insu	rance						5e.	\$	<u> </u>	316		\$_		N/A	-
	5f. Dom	estic suppo	ort obligation	ns				5f.	\$	5	0	.00	\$		N/A	_
	J	n dues						5g.		·		.00	\$_		N/A	_
		er deduction						5h				.00_ +	· : —		N/A	_
6.	-	•	tions. Add			ŭ		6.	\$		1,606		\$_		N/A	_
7.	Calculate t	otal monthl	ly take-home	e pay. Sub	btract line 6	3 from line 4		7.	\$		3,258	3.15	\$_		N/A	_
8.	8a. Net i profe Attac recei	ncome fron ession, or fa th a stateme	nt for each p and necess	perty and for	d business	showing gro	oss	8a.	\$	6	O	0.00	\$		N/A	
		est and divi						8b.	\$	·		.00	\$		N/A	_
	regu Inclu	larly receive de alimony,	payments the spousal supporting settle	port, child s	_	-	-	n t 8c.	\$		0	0.00	\$		N/A	_
			compensati					8d.				0.00	\$-		N/A	
		al Security						8e.	\$			0.00	\$_		N/A	_
	Inclu that y	de cash assi you receive, tion Assistar	ent assistand istance and to such as food nce Program	the value (it d stamps (b	if known) o penefits un	of any non-ca der the Supp		8f.	\$	<u> </u>		0.00	\$_		N/A	_
	J		ement incon					8g.		·		.00	\$_		N/A	_
	8h. Othe	er monthly i	ncome. Spe	cify:				8h	+ \$	§	0	.00	- \$_		N/A	
9.	Add all oth	er income.	Add lines 8a	э+8b+8c+8	3d+8e+8f+8	3g+8h.		9.	\$_		C	0.00	\$_		N/	A
10.		-	ome. Add lin 0 for Debtor			n-filing spou	ise.	10. \$	<u> </u>	3,2	58.15	+ \$_		N/A	= \$ _	3,258.15
11.	Include cor other friend	tributions from	contribution om an unmar s. ounts already	ried partne	er, member	rs of your ho	usehold, you	ur deper							e <i>J</i> . 	0.00
12.			e last colum le Summary											12.	\$	3,258.15
13.	Do you ex	pect an incr	ease or dec	rease with	nin the yea	ar after you	file this for	m?							Combi month	ned ly income
	■ No. □ Yes	s. Explain:														

Fill	in this informa	tion to identify yo	our case:			1		
	tor 1	Joseph Ray				Che	ck if this is:	
		- сесери нау	1				An amended filing	
	tor 2 ouse, if filing)						A supplement show 13 expenses as of	wing postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	AN		MM / DD / YYYY	
Cas	e number 17	'-50660						
(If k	nown)							
Of	fficial Fo	rm 106J						
		J: Your	Exper	ises				12/15
Be info	as complete a	and accurate as	possible.	If two married people ar				or supplying correct
Par 1.	t 1: Descr	ibe Your House	hold					
	■ No. Go to	line 2.	in a separ	ate household?				
	□N	0		al Form 106J-2, <i>Expense</i> s	for Separate House	e <i>hold</i> of Deb	otor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do your exp	enses include	_		-			☐ Yes
O.	expenses of	f people other t d your depende	han $_{m \Box}$	No Yes				
		ate Your Ongoi		y Expenses uptcy filing date unless y	au ara uaina thia f		unnlament in a Che	nuter 12 eees to report
exp				y is filed. If this is a supp				
the		n assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
(0)		01.)						
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgage	e 4. :	\$	711.54
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.	·	0.00
		maintenance, re owner's associat		ipkeep expenses		4c. 4d.		25.00
5.				our residence, such as ho	me equity loans	4u. 5.	·	0.00 0.00

Schedule J: Your Expenses 17-50660-mar Doc 20 Filed 08/21/17 Entered 08/21/17 14:40:25 Page 21 of 22 Official Form 106J